

# Application for Certified/Professional Employment

## GILA COUNTY REGIONAL SCHOOL DISTRICT #49

439 South Fourth Street, P.O. Box 2750 • Globe, Arizona 85501•

Phone: (928) 425-7800 Fax:(928) 425-7803

[www.gilacountyschools.org](http://www.gilacountyschools.org)

*~ An Equal Opportunity Employer ~*

Please print in black ink or use typewriter.

Date \_\_\_\_\_

### IDENTIFYING INFORMATION:

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street Apt. City/State Zip

Telephone: Home \_\_\_\_\_ Office \_\_\_\_\_ Message \_\_\_\_\_

Driver License No. \_\_\_\_\_ State \_\_\_\_\_ Type \_\_\_\_\_

If you have lived in Arizona less than two years, give previous address:

Address \_\_\_\_\_  
Street Apt. City/State Zip

How long at this address? \_\_\_\_\_

DESIRED (TYPE OF) POSITION: \_\_\_\_\_

Will you accept? (mark all that apply) ☐ Full Time ☐ Part Time ☐ Substitute ☐ Will Substitute

List languages that you fluently: Speak \_\_\_\_\_ Speak \_\_\_\_\_ Write \_\_\_\_\_

*No question on this application should be answered in such a manner as to disclose race, color, creed, national origin, ancestry, age, marital status, sex, or the existence of any physical or mental condition unrelated to the performance of the position for which you are applying.*

If employed by the Gila County Regional School District you will be required to provide the following information:

1. Fingerprint Clearance Card.
2. Selective Service registration number (if applicable).
3. Proof of immunization from measles/rubella unless exempt because of age, medical or religious reasons.
4. Proof of citizenship with a) one of the following documents: Valid U.S. Passport, Certificate of U.S. Citizenship, Certificate of Naturalization, unexpired foreign passport with attached Employment Authorization, Alien Registration Card with photo **or** b) one document from List A **and** one from List B below:

#### LIST A

State issued Driver's license or I.D. card  
U.S. Military Card

#### LIST B

Original Social Security Card  
Valid Birth Certificate  
Unexpired INS Employment Authorization

# • • • EMPLOYMENT EXPERIENCE • • •

*Please provide an accurate, complete history of full and part-time employment, including military service in chronological order, with present or most recent employer first. Please account for gaps in employment. Use extra page if necessary.*

EMPLOYER	FROM Month/Year	TO Month/Year	NO. OF YEARS	FT? or PT?
ADDRESS			TELEPHONE	
POSITION/DUTIES				
PRINCIPAL/SUPERVISOR	SALARY	REASON FOR LEAVING		

EMPLOYER	FROM Month/Year	TO Month/Year	NO. OF YEARS	FT? or PT?
ADDRESS			TELEPHONE	
POSITION/DUTIES				
PRINCIPAL/SUPERVISOR	SALARY	REASON FOR LEAVING		

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POSITION/DUTIES				
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EMPLOYER	FROM Month/Year	TO Month/Year	NO. OF YEARS	FT? or PT?
ADDRESS			TELEPHONE	
POSITION/DUTIES				
PRINCIPAL/SUPERVISOR	SALARY	REASON FOR LEAVING		

Have you ever been dismissed from a position? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Have you ever been asked to resign from a position? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Have you ever resigned rather than face disciplinary action and/or nonrenewal by an employer and/or disciplinary action against license/certificate? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

## • • • EDUCATIONAL PREPARATION • • •

List all colleges or universities attended for undergraduate study in chronological order. Begin with first undergraduate study and include institutions attended even though no degree was earned. Use additional page if necessary.

College or University and Location	Dates of Attendance	Major	Sem. Hrs. in Major	Minor	Sem. Hrs. in Minor	Degree Earned	Date Earned
Graduate Studies							

## • • • STUDENT TEACHING/INTERNSHIP • • •

School	Location	Cooperating Tchr/Supv.	Subject/Grade Taught	Dates

## • • • CERTIFICATION • • •

What Arizona certificates do you hold? Type of certificate: Elementary, Secondary, Vocational, School Nurse, Psychology, Social Work, etc.

Certificate (Please note if Standard, Provisional, Emergency, etc.)	Endorsements	Date of Issue	Expiration Date

## • • • REFERENCES • • •

Teachers and administrators who have previous experience are expected to list school administrators under whose supervision they have worked. Beginning teachers should list references qualified to give information demonstrating your fitness for the position you are seeking. List references in chronological order beginning with your most recent supervisor.

Name	Address	Title/Occupation	Telephone

ARE YOU CURRENTLY UNDER CONTRACT?

☐ Yes ☐ No

DATE AVAILABLE \_\_\_\_\_

• • • CONVICTION REPORT • • •

State Law (Arizona Revised Statutes §§ 15-512 and 15-534) requires that School Districts collect the following information regarding convictions from all applicants.\* A record of conviction does not prohibit employment, however, failure to complete this form accurately and completely **will** mean disqualification from employment or **will** be cause for dismissal if employed, and may result in prosecution for filing false information with a public agency. Applicants and employees **must** report any convictions that occur subsequent to the time they initially complete this form.

**ALL APPLICANTS NOT FINGERPRINTED PREVIOUSLY WILL BE FINGERPRINTED PRIOR TO EMPLOYMENT.** The background check is conducted by the Arizona Department of Public Safety (DPS) and the F.B.I. The fingerprint clearance card is issued by DPS.

Please read carefully and answer every question. Please print clearly.

1. Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Last                      First                      Middle

Other Names Used \_\_\_\_\_ Dates of Usage \_\_\_\_\_

2. Have you ever been convicted of a minor offense other than traffic violation(s)? ☐ Yes ☐ No
3. Have you ever been convicted of a felony? ☐ Yes ☐ No
4. Have you ever been convicted of any type of sex or drug-related crime? ☐ Yes ☐ No
5. Have you ever been convicted of a dangerous crime against children as defined in ARS § 13.604.01? \*\* ☐ Yes ☐ No

If any of the answers above are marked "Yes", fill in the information below and attach a letter of explanation.

Conviction Charge		Date of Conviction	Court of Conviction
City	State	Amount of Fine	Length of Jail Term
Remarks		Length and Terms of Probation	

Conviction Charge		Date of Conviction	Court of Conviction
City	State	Amount of Fine	Length of Jail Term
Remarks		Length and Terms of Probation	

*\*Conviction means the final judgment on a verdict or a finding of guilty, or a plea of guilty, or a plea of nolo contendere, in any state or federal court of competent jurisdiction in a criminal case, regardless of whether an appeal is pending or could be taken. Conviction does not include a final judgment which has been expunged by pardon, reversed, set aside, or otherwise rendered invalid. \*\* ARS § 13.604.01 requires applicants to give notice of any conviction for dangerous crimes against children. These crimes are defined as second degree murder, aggravated assault, sexual assault, molestation of a child, sexual conduct with a minor, commercial sexual exploitation of a minor, sexual exploitation of a minor, child abuse, kidnapping, and sexual abuse.*

READ THE FOLLOWING CAREFULLY, THEN SIGN AND DATE.

I certify that all information given on this application and any supporting information is true and complete, and I understand that any falsification or material omission of this information is grounds for refusal to hire or, if hired, termination. I authorize the district to investigate completely my application. I further authorize the District to contact all former and current employer references and educational institutions listed. All references are authorized to release all information they might have with regard to any of the subjects covered by this application, and I release this District and all references from any liability or damages which might result or be claimed because of information provided. I agree that, if hired, I will follow all District policies, rules, procedures, and other directions.

**Applicant's Signature**

Date \_\_\_\_\_

• • • **TEACHER'S PROFESSIONAL PERSPECTIVE** • • •

*Please respond to the following questions on a separate page (maximum, two pages) in your own handwriting. Thank you.*

1. What are the aspects of your education and experience that you think are particularly appropriate to this position?
2. When you consider working with "at-risk" students, in what major ways do you most want to influence their lives?
3. Describe the classroom conditions that best facilitate student learning for "at-risk" students in an alternative learning environment.
4. What strategies will you use to motivate "at-risk" students to succeed at high levels of performance?
5. How will you determine whether or not you are successful as a teacher in our school?
6. Prepare a letter that could be used when you are first hired to introduce yourself to the parents, students and school community. Include your beliefs about teaching and learning; help us visualize what life in your classroom will be like.
7. Please describe your plans for continuing professional growth and/or educational plans for the future.

• • • **ADDITIONAL INFORMATION** • • •

Your complete application package must include the following items:

- The completed application;
- A current resume;
- Placement file and/or three letters of recommendation related to recent experience;
- *Copies* of transcripts (if employed, you will need to provide *official* transcripts at that time);
- Evidence of valid Arizona certification; and
- Fingerprint Clearance Card.

# GILA COUNTY REGIONAL SCHOOL DISTRICT #49

## **PROFESSIONAL STAFF**

### **CONSENT TO CONDUCT BACKGROUND INVESTIGATION AND RELEASE**

I, \_\_\_\_\_ [applicant's name], have applied for employment with the Gila County Regional School District to work as a \_\_\_\_\_ [job title]. I understand that in order for the School District to determine my eligibility, qualifications, and suitability for employment, the School District will conduct a background investigation to determine if I am to be considered for an offer of employment. This investigation may include asking my current employer, any former employer, and any educational institution I have attended about my education, training, experience, qualifications, job performance, professional conduct, and evaluations, as well as confirming my dates of employment or enrollment, position(s) held, reason(s) for leaving employment, whether I could be rehired, reasons for not rehiring (if applicable), and similar information.

I hereby give my consent for any employer or educational institution to release any information requested in connection with this background investigation.

According to the Family Educational Rights and Privacy Act, I understand that I have a right to see most education records that are maintained by any educational institution.

In light of the preceding paragraph, I waive \_\_\_\_\_/do not waive \_\_\_\_\_ (initial only one [1]) my right to see any written reference or other information provided to the School District by any educational institution.

According to Arizona Revised Statutes Section 23-1361, any employer that provides a written communication to the School District regarding my current or past employment must send me a copy at my last known address. I acknowledge that some employers are unwilling to provide factual written references concerning a current or past employee unless they may do so confidentially, without revealing the references to the employee, and that the School District will not further consider my application if it cannot complete its background investigation.

In light of the preceding paragraph, I waive \_\_\_\_\_/do not waive \_\_\_\_\_ (initial only one [1]) my right to receive a copy of any written communication furnished to the School District by any employer.

Whether or not I have waived my right to see or to receive copies of written references furnished to the School District by employers or educational institutions, I release, hold harmless, and agree not to sue or file any claim of any kind against any current or former employer or educational institution, and any officer or employee of either, that in good faith furnishes written or oral references requested by this School District to complete its background investigation.

A photocopy or facsimile ("fax") copy of this form that shows my signature shall be as valid as an original.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Applicant

# **GILA COUNTY REGIONAL SCHOOL DISTRICT #49**

## **EQUAL OPPORTUNITY/AFFIRMATIVE ACTION INFORMATION**

NAME \_\_\_\_\_ DATE \_\_\_\_\_  
Last First Middle

The Gila County Regional School District No. 1 is an Equal Opportunity/Affirmative Action Employer and attempts to be completely unbiased and fair in its employment practices. For this reason, we have eliminated any mention of race, national origin, or sex on application forms. However, we are required to keep a separate record to verify that female and/or national and/or ethnic minority applicants receive full consideration for all position openings. From this standpoint, it would be helpful to us if you would provide the information requested below. This information will be kept confidential and will not be filed with nor made a part of your application.

**PLEASE CHECK THE APPROPRIATE ITEMS IN EACH OF THE FOLLOWING CATEGORIES:**

**RACE**

- ( ) American Indian  
( ) Asian  
( ) Black  
( ) Caucasian  
( ) Hispanic\*  
( ) Other \_\_\_\_\_

**SEX**

- ( ) Male  
( ) Female  
( ) American Indian

**Are you a veteran?** ☐ Yes ☐ No

Dates of Service \_\_\_\_\_

**Are you handicapped?** ☐ Yes ☐ No

**How did you hear of this job?** \_\_\_\_\_

\*Includes persons of Mexican, Puerto Rican, Latin American or other Hispanic origins.

**SPECIFIC POSITION APPLIED FOR:** \_\_\_\_\_

**Signature:** \_\_\_\_\_